## **STATEMENT OF**

FORM 1	ORGANIZATIO (See instructions)	ON	Of	fice use only
NAME OF COMMITTEE (in t	(Check if name Ex is changed) ov	cample: If typying, type er the lines	12FE4M5	ince dec only
IntegraPAC of	Integra Telecom Holdings Inc.			
ADDRESS (number and s	1201 NE Lloyd Blvd.		<del>                                     </del>	
(Check if address is changed)	Suite 500		1 1 1 1 1 1	
	Portland		OR L	97232
	CITY	•	STATE	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail add			
(Check if address X is changed)	dale.perry@integratelecor	n.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.5	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER C C	00428094		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my knowledge	and belief it is true, correct and	complete	
Type or Print Name of	Freasurer Dale, Perry			
Signature of Treasurer	Electronically Filed by <b>Dale, Perry</b>		Date 05	21 / 2010
NOTE: Submission of fal	se, erroneous, or incomplete information may subjec	,	•	of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commissis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)